



SEATTLE COLLEGES

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RELEASE FORM

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- (a) Record my likeness and voice on video, audio, photographic, digital, electronic, online formats, or on any and all other media.
- (b) Record my testimonial statements/comments through digital media and/or transcription.
- (c) Use my name in connection with these recordings.
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I hereby release Seattle Colleges and those acting pursuant to its authority from liability, claims, and demands for any violation of any personal or proprietary right I may have in connection with such use, including any and all claims for libel, defamation and/or invasion of privacy. I understand that all such recordings, in whatever medium, shall remain the property of Seattle Colleges. I have read and fully understand the terms of this release.

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City: _____ State: _____ Zip: _____

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Parent/Guardian Signature (if under 18): _____

Date: _____

Witnessed By: _____ Date: _____
(signature)